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# Guide to Nursing Homes: Making That Important Decision

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STAFF? LIVING ARRANGEMENT

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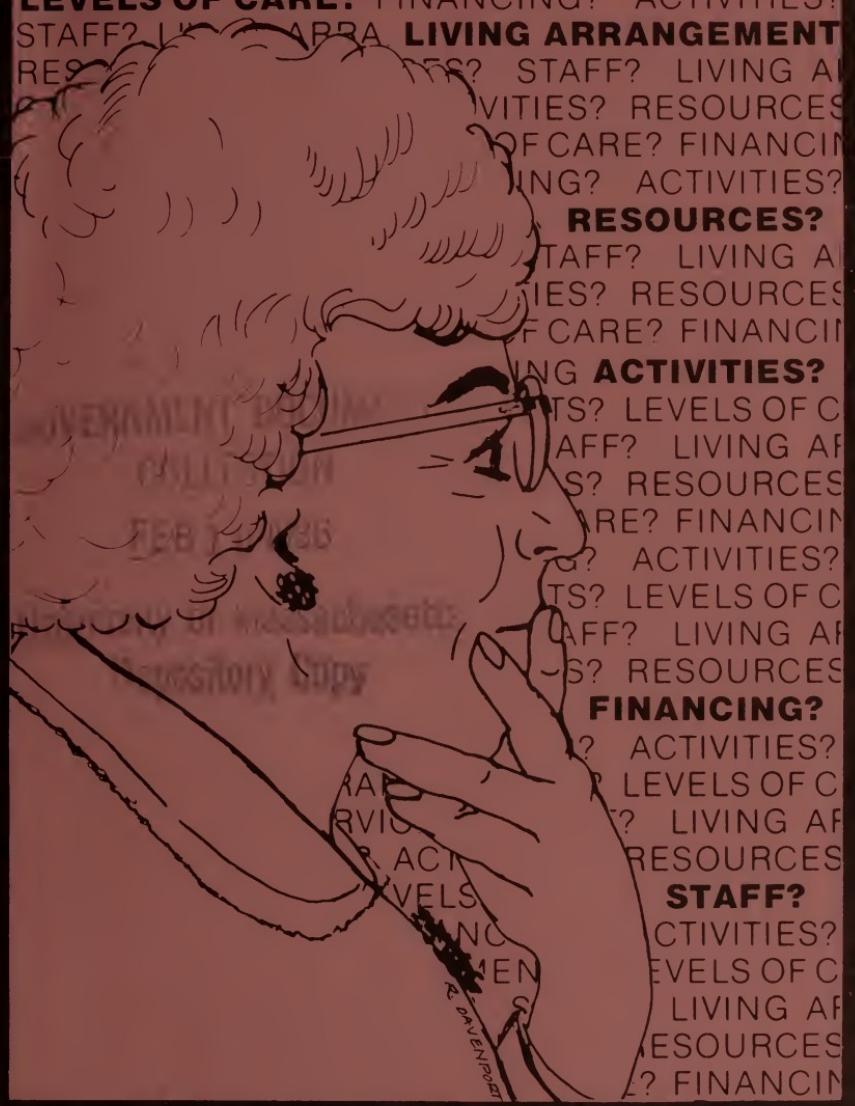
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Dear Reader:

The Department of Public Health's Division of Health Care Quality is responsible for making sure that nursing homes and rest homes throughout the Commonwealth meet and maintain standards of patient care and safety. This guide is part of our effort to assure a better life for residents in Massachusetts nursing homes.

We know that selecting a nursing home for a friend or relative is often a confusing and difficult task. This consumer's guide is designed to help make that important choice a little easier. We hope you will find it useful.

Sincerely,

A handwritten signature in black ink, appearing to read "Bailus Walker Jr. Ph.D. M.P.H."

Bailus Walker, Jr., Ph.D., M.P.H.  
Commissioner



## Finding a Nursing Home

Finding the right nursing home for a friend or family member can be a difficult task. Locating an appropriate home and making arrangements for admission will take some time. Therefore, you should plan ahead and try to involve the individual who will be living in the home in the decision-making process, as much as possible.

There are a number of steps to be taken in selecting a nursing home.

1. Have a physician determine the type (level) of nursing home care required to meet the individual's needs.
2. Assess the individual's financial resources to pay for such care. Nursing home care is expensive and it is absolutely vital to have a clear understanding of the costs involved before making a decision on a home. Your family member or friend may be eligible to receive financial assistance through the Medicare or Medicaid programs. If the individual is eligible for either of these programs, you should seek a nursing home that participates in either or both of these programs.
3. Decide upon a general location which will be convenient for the very important visits of family and friends.
4. Make a list of homes in this area and call them to inquire about levels of care offered, availability of a bed, services provided, costs, affiliation and certification for Medicare or Medicaid.
5. Talk to people in your community who might have information about the homes on your list. Persons who may be able to provide information include doctors, lawyers, clergy, social service agencies, pharmacists, the local Welfare office and anyone with a relative in one of the homes on your list.
6. Visit each home you want to consider. See the checklist at the end of this pamphlet for things to look for.

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## **Resources Available to Help You Find a Nursing Home**

Please keep in mind that you do not have to undertake the task of finding a nursing home alone. There are many resources available that can assist you in finding a nursing home. These include:

1. The Massachusetts Department of Public Health, Division of Health Care Quality (DHCQ) will answer questions you may have concerning levels of care, licensure status and Medicaid/Medicare certification at specific nursing homes. Contact the "Surveyor of the Day" at the phone numbers or address listed on the back cover of this brochure.
2. A hospital discharge planning unit can assist you if your relative or friend needing a nursing home is in a hospital.
3. Local Councils of Aging and senior citizen organizations may provide information about the nursing homes in your area.
4. The Association of Massachusetts Homes for the Aging, 5 New England Executive Park, Burlington, MA 01803, (617) 272-6592 and the Massachusetts Federation of Nursing Homes, 886 Washington Street, Dedham, MA 02026, (617) 326-8967 are other useful sources of information.
5. The Women's Educational and Industrial Union publishes a "Guide to Nursing Homes and Rest Homes in Massachusetts." The guide provides information about services, admission policies, and languages spoken for all nursing homes in the Commonwealth. To buy a copy, call or write to the Women's Education and Industrial Union, Social Services Department, 356 Boylston Street, Boston, MA 02116, (617) 536-5651.
6. The Ombudsman Unit of the Executive Office of Elder Affairs provides information and referral to individuals concerning nursing home placement, public benefit programs, and Medicare. For more information about this program call: (617) 727-7273 or 1-(800)-822-2003 (toll free) or write State Nursing Home Ombudsman Program, Executive Office of Elder Affairs, 38 Chauncy Street, Boston, MA 02111.
7. The Department of Public Welfare's Long Term Care Connection program (formerly called the Case Management Screening Program) is designed to assist elders and their families in determining the best setting for long term care. Social worker and nurse teams evaluate an individual's care needs and functional status. The team evaluates the appropriateness of alternatives to nursing home care, but if nursing home care is required, the team can provide placement assistance. The program provides screening for Medicaid recipients and free consultation to those who are not eligible for

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Medical Assistance. For more information or to request a screening, contact your local Welfare Service Office listed in the blue pages under Massachusetts - Public Welfare Department. In the Worcester County area call (617) 368-8541. In the Bristol County/Fall River, New Bedford, Plymouth County, and Cape Cod Islands areas call (617) 824-1383 or (617) 822-7550.

## **Types of Facilities and Levels of Nursing Home Care in Massachusetts**

Nursing homes in Massachusetts may provide three different levels of care. All homes are licensed and classified by the type of care they provide, from the most intensive care - skilled care, to the least intensive - rest home care.

You will want to choose a nursing home which offers the appropriate level of care for the individual. Keep in mind that a nursing home may be licensed to provide more than one level of care.

Types of homes, services provided, and levels of care are described below:

**Skilled Nursing Facility (SNF)** - In this type of facility, services and care are provided on a twenty-four hour basis under the direction of a physician and furnished by or under the direction of a registered nurse.

Examples of skilled services are intramuscular injections, intravenous feedings, and insertion or replacement of catheters. In addition, a Skilled Nursing Facility must make available special rehabilitation services by qualified personnel (e.g., physical therapy, speech therapy, audiology, and social services). Skilled Nursing Facilities may be certified to provide services to persons who are eligible for Medicare and/or Medicaid (see explanation of Levels of Care below).

**Intermediate Care Facility (ICF)** - In this type of facility, care and services are provided to persons who do not require the degree of care and treatment which a skilled nursing facility is designed to provide, but who, because of their physical condition, require care and services which can be made available to them only in a supervised setting such as a nursing home.

Examples of Intermediate Care Facility services are routine observation and recording of vital signs, administration of oral medications, and application of uncomplicated sterile dressings. Intermediate Care Facilities may be certified to provide services to persons who are eligible for Medicaid. Medicare will not cover the cost of ICF care.

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**Rest Home (RH)** - This type of facility provides room and board and minimal medical supervision for ambulatory persons who do not routinely require nursing services. Supplemental Security Income (SSI) will pay for the cost of Rest Home living arrangements for those individuals who meet the SSI eligibility requirements.

**Levels of Care** - Four levels are specified in state nursing home regulations: Level I and Level II are the Skilled Nursing Facility designations with Level I referring to facilities that accept Medicare patients and Level II to facilities that provide SNF care, but accept only private-paying or Medicaid patients. Intermediate Care Facilities are referred to as Level III facilities, and accept private pay and Medicaid patients. Rest Homes are designated as Level IV facilities. As noted above, some rest homes accept SSI-supported patients.

## **Services Provided in Nursing Homes**

### **Medical Services**

All incoming residents are required to designate the physician who will be responsible for their continuing medical care. Residents have the option of designating the physician of their choice, usually their personal doctor, or having the home designate an attending physician for them. If the individual's personal physician is to continue as the responsible physician, make sure he or she understands the visit requirements for physicians. Massachusetts requires that a physician visit patients requiring skilled nursing home care at least every sixty days, residents requiring intermediate care at least every ninety days, and residents requiring rest home supervisory care at least every six months.

### **Social Services**

All nursing homes are required to provide Social Services. The staff social worker or the social worker consultant helps residents and their families in the adjustment to the nursing home. The social worker also provides input to see that residents' emotional as well as medical needs are considered in the planning and delivery of care. The social worker should be available when necessary to advise and assist residents and their families.

### **Rehabilitation Therapy Services**

Rehabilitation services include physical therapy, occupational therapy, and speech and language therapy. Adequate provision of these services to meet residents' needs is required of all facilities.

### **Other Professional and Diagnostic Services**

Nursing home staff should assist residents in obtaining routine and emergency diagnostic, x-ray, dental, podiatry, audiology and laboratory services as indicated by their medical plan.

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## Paying for Nursing Home Care

### Private Pay

When private payment for nursing home services is intended, costs and ability to pay should be assessed before the patient moves into the home. If you are the person who will pay, request that the facility submit a monthly itemized bill so you can verify that the services paid for are the services received. Also, request a list of all items and services for which there is an extra charge. These hidden charges can add substantially to the bill.

### Medicare

Medicare is a federal reimbursement program which will help pay for up to 100 days of "skilled" nursing home care for persons 65 or over. Medicare also covers certain individuals receiving disability insurance benefits and insured workers and their dependents who need kidney dialysis treatments. All of the following criteria must be met for Medicare eligibility:

1. The individual has been in a hospital at least three days in a row (not counting the day of discharge) before transferring to a participating skilled nursing facility.
2. The individual is transferred to the skilled nursing facility because he or she requires care for a condition that was treated in the hospital.
3. The individual is admitted to the facility within a short time (generally 30 days) after leaving the hospital.
4. A doctor certifies that the individual needs and actually receives skilled nursing or skilled rehabilitation services on a daily basis.
5. The facility's Utilization Review Committee or peer review organization does not disapprove the individual's stay.

It is important to understand that Medicare does not pay the total cost of the first 100 days of "skilled" nursing home care. Also, Medicare benefits can be terminated any time the patient no longer meets the criteria. If you have any questions or would like more information regarding Medicare coverage of nursing home expenses, contact your local Social Security Office listed in the blue pages under U.S. Government - Social Security Administration.

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## **Medicaid**

Medicaid (Medical Assistance) is a state and federal program which will pay for "skilled" and "intermediate" care for an unlimited amount of time for persons who need such care and meet the Medicaid eligibility requirements. Whether a current recipient or not, if your friend or relative is planning to enter a nursing home, the local Welfare Service Office should be notified. If you are going to rely on payment from the Medicaid program, application should be made prior to your search for a nursing home or prior to termination from the Medicare program.

Medicaid recipients are required to go through the screening process of the Department of Public Welfare's Long Term Care Connection program prior to admission to a nursing home. A free consultation is also available to those who are not eligible for Medical Assistance. If you would like to request a Long Term Care Connection screening or consultation, or if you would like detailed information regarding Medicaid eligibility, contact your local Welfare Service Office listed in the blue pages under Massachusetts - Public Welfare Department.

State law requires that a nursing home certified to provide services to persons eligible for Medicaid cannot discriminate. Therefore, a home cannot deny placement to an individual strictly because of their Medicaid status. This law also protects those persons who have been admitted as private paying or Medicare patients from being transferred, if they should happen to become eligible for Medicaid at a later date. If you feel that a nursing home is discriminating against an individual because of his or her Medicaid status, contact the Massachusetts Nursing Home Ombudsman Program at (617) 727-7273 or 1-(800)-822-2003 (toll free).

## **Supplement Security Income (SSI)**

SSI is a federal and state reimbursement program which will pay for Rest Home living expenses of those people who are eligible. To qualify for SSI a person must have income and resources which are within certain income limits. For more detailed information regarding SSI eligibility contact your local Social Security Office listed in the blue pages under U.S. Government - Social Security Administration.

## **Personal Needs Allowance**

Nursing home residents will need money available to them at the home for personal needs items. The Medicaid program provides a monthly personal needs allowance to Medicaid recipients in nursing homes. Ask the administrator about the accounting system maintained by the facility and inquire about the provisions made to safeguard personal needs money.

## **Visiting a Prospective Home**

Whether you receive a formal tour of the facility by the administrator or social worker or walk through on your own, you will need to make a determination regarding the quality of care offered by the facility.

Make a point to talk with a number of the residents and staff. In addition to your own impressions, their comments should enable you to make a fairly accurate judgement on the quality of the home. Take your time - do not let anyone rush you through the facility. Above all, do not be afraid to ask questions. A reputable home will have nothing to hide.

A nursing home visitation checklist at the back of this brochure suggests items to observe and questions you may wish to ask nursing home staff when you visit the facility.

### **\* Check for Cleanliness**

A good home is kept clean. There should be no strong odor of urine or heavy cover-up deodorants. Pay particular attention to the cleanliness of residents' rooms, including linens, floors, bedside tables, countertops, and windows. The kitchen, bathrooms, dining area, lounges and nurses stations should also be clean.

### **\* Note Attitude of Staff**

The quality of services provided by a nursing home greatly depends upon the attitudes and competency of its staff. A good staff cares about the well-being of residents. Observe the way the staff interacts with individual residents. Staff may be firm with residents, but they should always treat them with kindness, dignity and respect. Staff should address the residents by name.

### **\* Observe the Appearance of Residents**

Notice the physical appearance of the residents. They should appear clean, well-groomed and appropriately dressed. Room-bound patients should be comfortably positioned with pillows in their beds or chairs. Ask a few residents their opinion of the home.

### **\* Observe the Atmosphere of the Home**

Notice the type of atmosphere which is provided in the facility. A better home will have comfortable furnishings, pictures, plants, seasonal decorations and other items which make the environment more homelike and stimulating for its residents. Look to see if the residents have added their own personal touches and possessions to their rooms. Some homes will be more restrictive than others in allowing this practice.

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Notice the overall atmosphere of the home. There should be a bustle of activity as residents and staff go about their daily routines. Staff should be attending to the residents and not grouped around the nurses' station. Residents should be up and out of bed if possible.

Look to see whether the activity room and residents' lounges are being used. Inquire about the types of activities which staff persons provide for the residents. Remember that a T.V. set alone does not constitute adequate recreation. A nursing home must provide an activity and recreation program geared to the interests and abilities of its residents. Physical and mental stimulation are extremely important in sustaining the health and well-being of nursing home residents.

\* **Check the Quality of the Dietary Services**

Do not overlook the dietary services when visiting a nursing home. Proper nourishment is extremely important in restoring and maintaining the health of older people. It is recommended that you schedule your visit at a time when you can observe an afternoon or evening meal being served. The meal should be nutritionally balanced and appear appetizing. Request a sampling of the food being served to judge its quality and taste. You may wish to speak to some of the residents about the quality of the food.

The dining area should provide a relaxed atmosphere for the residents. Inquire if a resident may receive an appropriate substitution should he or she dislike what is being served at a particular meal. In addition to regular meals, a good home will offer snacks at appropriate times of the day that are nourishing as well as satisfying.

\* **Check the Facility's License to Operate**

In Massachusetts, a license is required for every nursing home. All nursing homes are inspected for licensure by the Department of Public Health. In addition, each home must comply with local fire and sanitary codes. The current Department of Public Health license certificate or an equivalent approval to operate letter must be posted within the facility.

Nursing homes participating in the Medicare or Medicaid program must be certified annually by the Department of Public Health in order to receive federal reimbursement. Therefore, if applicable, you will also want to make sure that the home you choose is currently certified.

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\* **Schedule an Appointment to Meet with the Administrator and/or Social Worker**

The administrator is responsible for the operation of the home. The social worker and nursing staff help residents and their families in adjusting to the nursing home. If facility staff seem interested in your concerns and answer your questions candidly, then it is likely that they are interested in operating a home that offers each individual optimal care and services. Remember to call ahead for an appointment.

### **Patient Rights**

Because someone is ill or aged and in a nursing home does not mean he or she loses basic individual rights. It is important to keep this fact in mind while looking for a home and once the individual is residing in the facility.

The concept of patient rights has been considered seriously by both the federal and state governments. In Massachusetts, additional regulations protecting patient rights have been developed by the Attorney General's Office. These regulations should be posted in each facility, as well as presented and signed by the resident or his/her legal guardian before admission.

### **Consumer Protection**

If you have a problem or complaint regarding the quality of services being rendered, a possible violation of patient rights, or the physical conditions existing within a nursing home, you should register the complaint with the Department of Public Health, Division of Health Care Quality at the address listed on the back cover of this brochure.

Another place to air complaints is with the state Nursing Home Ombudsman Program within the Executive Office of Elder Affairs. The Ombudsman Program provides assistance to residents of facilities, either by providing information or by resolving problems which might affect them. While the Ombudsman program receives complaints from any source, the basic policy of the program is to resolve the problems within the facility whenever possible. Typical problems which might be handled by the Ombudsman Program include complaints concerning cleanliness of the facility, food service, personal needs allowance, missing items, physician visits or loneliness. To contact the Ombudsman Program call (617) 727-7273 or 1-(800)-822-2003 (toll free).

## **Patient Abuse Reporting**

The Department of Public Health is responsible for receiving and investigating complaints of alleged patient abuse. Incidents of abuse, mistreatment and neglect should be reported immediately to the Department's Division of Health Care Quality at the telephone numbers on the back cover of this brochure and followed up in writing. Specific information will be requested of the complainant by Department personnel in order that appropriate action may be taken. All information obtained in such an investigation remains confidential.

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### **Nursing Home Visitation Checklist**

The following checklist is meant to suggest the kinds of questions you may wish to ask when visiting a prospective nursing home. Some of the items may not be relevant to your particular situation, and so may be omitted. Of course, you may have other questions that are not included on this checklist. You should feel free to raise additional questions at any home you are considering.

#### **Items to Observe**

##### **1. Staff**

- Does the administrator/manager appear to know the residents?
- Does the staff show interest in individual patients?
- Is the staff courteous?
- Is the staff attitude condescending or are residents treated with dignity and respect?
- Does the staff use childish nicknames when speaking with residents?
- Do they talk about residents as if they were not present (e.g., "She really doesn't understand" or "Isn't he cute?"), or as if they are children?
- Is privacy respected (e.g., knocking on doors before entering rooms; keeping cubicle curtains drawn while care is being given)?
- Are calls for assistance responded to within a reasonable amount of time?
- Do the majority of the residents appear active, alert and relatively content - not listless?

## **2. Resident Rooms**

- Are rooms attractive, cheerful, clean and well-lit?
- Is there a bedside stand, reading light, bureau drawer and at least one comfortable chair or geri-chair for each resident?
- Is closet space sufficient? Is additional storage space available if needed?
- Are beds easy to reach? Is there room to maneuver a wheelchair easily?
- Do doors or walls have name plates indicating who resides in each room?

## **3. Resident Lounge Areas**

- How many lounge areas are available for residents?
- Does there seem to be sufficient space for visitors, conversation, and T.V. watching?
- Are lounges clean, comfortably furnished and generally pleasant?
- Are there non-smoking areas?

## **4. Activity Programs**

- Are activity calendars posted? If not, ask for a breakdown of regularly scheduled daily activities and upcoming events.
- Do the activities include a variety of interests?

## **5. Dining Area**

- Is the dining area pleasant, comfortable, clean and easily accessible?
- Are residents encouraged to eat there? Is it large enough to hold the majority of residents?
- Are tables convenient for wheelchairs?
- Is the atmosphere relaxing, or do mealtimes appear chaotic?

## **6. Menus and Food**

- Has the home served the same meal that is listed on the menu?
- What methods are used to keep hot foods hot and cold foods cold?
- Are dishes and silverware used, or disposable plates and utensils?
- Does the food appear appetizing? Does it smell appetizing?
- Do residents appear to be enjoying their meal or do many leave large portions of their food untouched?
- Is the food served to residents who are unable to eat in the dining room kept hot until served?
- Menus may be posted; if none is posted, ask to see a sample menu.
- How often are menus repeated? Are alternatives available?

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## **Questions to Ask Nursing Home Staff**

### **1. Rules and Procedures**

In which area of the home would a new resident be assigned a room?  
Do residents have a choice of roommates? Are residents permitted to move if a roommate is incompatible?  
May a resident be taken out occasionally by family or friends? What are visiting hours?  
May residents have their own T.V., radio, phonograph, furniture?  
May residents hang pictures on the walls?  
What are the restrictions on smoking for both residents and staff?  
How are a resident's personal finances handled and accounted for?  
May a resident have alcoholic drinks, if the doctor permits?

### **2. Medical Care**

What are the medical emergency procedures?  
To which hospitals are seriously ill patients transferred?  
What happens if a relative/friend needs to see a medical specialist?  
Who controls and gives medications?

### **3. Services/Staff**

How is transportation provided for trips to hospitals, medical offices, or community functions? Is there a charge?  
Are podiatry and dental services available? Is there a charge?  
What arrangements does the home have for personal laundry?  
Are beauty and barber shop services available? At what cost? How often?  
Is bookmobile service available?  
Is there a resident "store"? Do residents take part in its operation?  
Does the home have volunteers? What is the extent of their participation?  
Can residents attend religious services in or out of the home?  
Are special diets available (e.g., kosher, vegetarian, etc.)?

### **4. Activities**

Do residents participate in planning activities?  
Are there planned and frequent group excursions from the home for shopping or entertainment?  
Is there a resident newspaper? Are residents encouraged to contribute or take part in its production?  
Is there a resident council? How active is it? What functions does it perform?  
How are holidays celebrated?

\* Source for checklist: Wisconsin Department of Health and Social Services, Division of Health, "How To Make Informed Decision about Nursing Homes", **Health in Wisconsin** Vol. 29 No.4, 1983. Madison, Wisconsin

**To Contact the Division of Health Care Quality**

**For information about the licensure and certification of any health care facility in Massachusetts:**

**WRITE**

**Division of Health Care Quality  
Massachusetts Department of Public Health  
150 Tremont Street  
Boston, MA 02111**

**OR CALL**

**(617) 727-5860  
1-(800)-462-5531 (Toll Free)  
and ask for the "Surveyor of the Day"**

**To report a suspected case of patient abuse, mistreatment or neglect or to make a complaint about any health care facility:**

**WRITE**

**Patient Complaint Unit  
Division of Health Care Quality  
Department of Public Health  
150 Tremont Street  
Boston, MA 02111**

**OR CALL**

**(617) 727-8984 (9-5, Monday - Friday)  
(617) 522-3700 (Evenings and Weekends)  
1-(800)-462-5540 (Toll Free)**

**All telephone inquiries must be followed by a written complaint.  
All complaints are investigated and information remains confidential.**



**Michael S. Dukakis**  
**Governor**

**Philip W. Johnston**  
**Secretary of Human Services**

**Bailus Walker, Jr.**  
**Commissioner of Public Health**

**Irene R. McManus**  
**Director of Division of Health Care Quality**